


B\$

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: RICE ET AL.
Serial No.: 09/054,233
Filed: APRIL 2, 1998
Notice of Allow. Date: JUNE 12, 2001
Due Date: SEPTEMBER 12, 2001
Title: AUTOMATIC MESSAGE INTERPRETATION AND ROUTING SYSTEM



Examiner: A. KHATRI
Group Art Unit: 2122
Docket: 13714.1USU1
Batch No.: H51

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence and the paper(s), as described herein, are being deposited in the United States Postal Service, as first class mail, with sufficient postage, in an envelope addressed to: BOX ISSUE FEE, Commissioner for Patents, Washington, D.C. 20231, on September 12, 2001.

By: 
Kristine A. Wroble

BOX ISSUE FEE
Commissioner for Patents
Washington, D.C. 20231

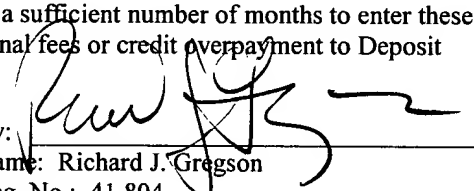
Sir:

We are transmitting herewith the attached:

- ☒ Transmittal Sheet in duplicate containing Certificate of Mailing
- ☒ Issue Fee Transmittal Part B (PTOL - 85B)
- ☒ Submission of Formal Drawings, 3 Formal Drawings
- ☒ Check(s) in the amount of \$620.00 for payment of issue fee and \$33.00 for 11 patent copies
- ☒ Return postcard

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers or any future reply, if appropriate. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

MERCHANT & GOULD P.C.
P.O. Box 2903, Minneapolis, MN 55402-0903
612.332.5300

By: 
Name: Richard J. Gregson
Reg. No.: 41,804
RGregson:PSTkaw



PART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with applicable fees, to:

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

TM01/0612

RICHARD J. GREGSON
P.O. BOX 2903
MENNEAPOLIS MN 55402-0903

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Kristine A. Wack (Depositor's name)

Kristine A. Wack (Signature)

September 12, 2001 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/054,233	04/02/98	066	KHATRI, A 2122	06/12/01
First Named Applicant RICE, 35 USC 154(b) term ext. = 0 Days.				

TITLE OF INVENTION: AUTOMATIC MESSAGE INTERPRETATION AND ROUTING SYSTEM

ATTYS DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 17111-23US	706-047.000	H51	UTILITY	YES	\$620.00	09/12/01

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Merchant & Gould P.C.

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Brightware, Inc.

(B) RESIDENCE (CITY & STATE OR COUNTRY)

Novato, California

Please check the appropriate assignee category indicated below (will not be printed on the patent)

- ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

- ☒ Issue Fee
☒ Advance Order - # of Copies 11

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 13-2725
 (ENCLOSE AN EXTRA COPY OF THIS FORM)

- ☐ Issue Fee
☐ Advance Order - # of Copies _____

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

09/20/2001 HFMN11 00000103 09054233

01 FC:242
02 FC:361620.00 BP
33.00 CP

TRANSMIT THIS FORM WITH FEE